PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 Application or Docket Number /// 173986														
CLAIMS AS FILED - PART I														┨ .
(Column 1) (Column 2)													THAN ENTITY	
T	OTAL CLAIMS	<u> </u>	26-					RAT	Ε	FEE]	RATE	FEE	1
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00	1
TC	TAL CHARGE	ABLE CLAIMS	26 - minus 20=		.6			XS 9	=		OR	X\$18=	1080	
IN	DEPENDENT C	LAIMS	2 _ minus 3 =		Ø			X43	=		OR	X86=		ſ
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT	ENT				+145	_		1			
- 11	the difference	in column 1 is	less than z	ess than zero, enter "0" in column 2			į	TOTA	_		OR		636	
CLAIMS AS AMENDED - PART II										<u> </u>	Jon	OTHER	8787	10
6	6//3/05 (Column 1) (Column 2) (Column 3)								LL E	ENTITY	OR	SMALL		
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMÉ PREVIO PAID I	BEA	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	٠
NO.	Total	. 24	Minus	- 2	-	. —		XS 9:	_		OR	X\$18=	-	
ME	Independent	. 2	Minus	978 (3			X43=				X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-		OR	7.00-	_	
+145=											OR	+290=		ŀ
									AL EE		OR	TOTAL ADDIT, FEE		
_		(Column 1) (Column 2) (Column 3) CLAIMS HIĞHEST												İ
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	•	=	1	X\$ 9=			OR	X\$18=		
	Independent	•	Minus	***		=	ŀ	X43=	7		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+					
+145= TOTAL											OR	+290=		
ADDIT. FEE											OR	ADDIT. FEE		
	•	(Column 1)		(Colum		(Column 3)	_		_		•			
ENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT C	Total	•	Minus	**	•	-		X\$ 9≈	T		OR	X\$18=		
	Ind pendent	* .	Minus	***		3	┢	X43=	十		1	X86=		
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+		OR			
+145=											OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE ADDIT. FEE											OR ,	TOTAL ADDIT. FEE		
		mber Previously Paid ber Previously Paid					foun	d in the	appr	opriate box	in col	umn 1.		